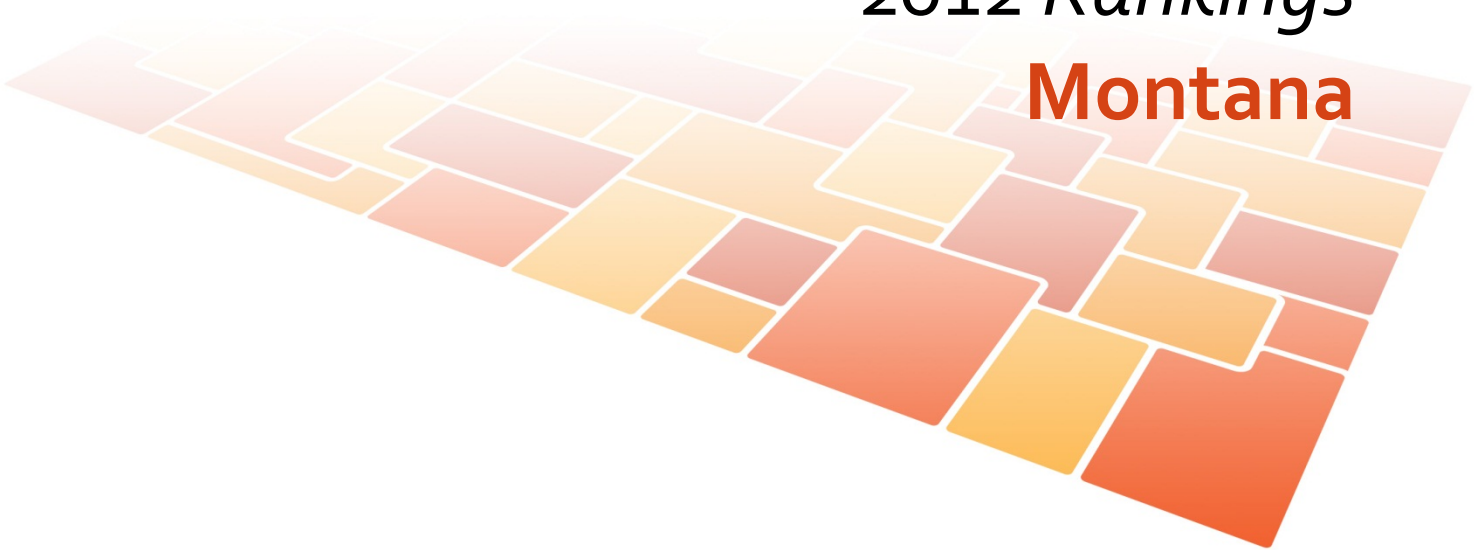


# County Health Rankings & Roadmaps

A Healthier Nation, County by County

## 2012 *Rankings* **Montana**





## Introduction

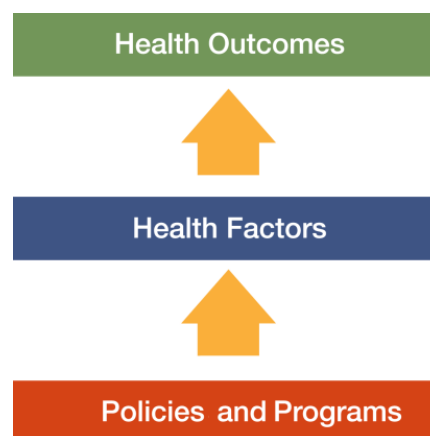
Where we live matters to our health. The health of a community depends on many different factors, including the environment, education and jobs, access to and quality of healthcare, and individual behaviors. We can improve a community's health by implementing effective policies and programs. For example, people who live in communities with smoke-free laws are less likely to smoke or to be exposed to second-hand smoke, which reduces lung cancer risk. In addition, people who live in communities with safe and accessible park and recreation space are more likely to exercise, which reduces heart disease risk.

However, health varies greatly across communities, with some places being much healthier than others. And, until now, there has been no standard method to illustrate what we know about what makes people sick or healthy or a central resource to identify what we can do to create healthier places to live, learn, work and play.

We know that much of what influences our health happens outside of the doctor's office – in our schools, workplaces and neighborhoods. The *County Health Rankings & Roadmaps* program provides information on the overall health of your community and provides the tools necessary to create community-based, evidence-informed solutions. Ranking the health of nearly every county across the nation, the *County Health Rankings* illustrate **what we know** when it comes to what is making communities sick or healthy. The *County Health Roadmaps* show **what we can do** to create healthier places to live, learn, work and play. The Robert Wood Johnson Foundation collaborates with the University of Wisconsin

Population Health Institute to bring this groundbreaking program to counties and states across the nation.

The *County Health Rankings & Roadmaps* program includes the *County Health Rankings* project, launched in 2010, and the newer *Roadmaps* project that mobilizes local communities, national partners and leaders across all sectors to improve health. The program is based on this model of population health improvement:



In this model, health outcomes are measures that describe the current health status of a county. These health outcomes are influenced by a set of health factors. Counties can improve health outcomes by addressing all health factors with effective, evidence-informed policies and programs.

Everyone has a stake in community health. We all need to work together to find solutions. The *County Health Rankings & Roadmaps* serve as both a call to action and a needed tool in this effort.

## Guide to Our Web Site

To compile the *Rankings*, we selected measures that reflect important aspects of population health that can be improved and are available at the county level across the nation. Visit [www.countyhealthrankings.org](http://www.countyhealthrankings.org) to learn more.

To get started and see data, enter your county or state name in the search box. Click on the name of a county or measure to see more details. You can: Compare Counties; Download data for your state; Print one or more county

snapshots; or Share information with others via Facebook, Twitter, or Google+. To understand our methods, click on Learn about the Data and Methods. To learn about steps that you can take to improve health in your community, click on the *Roadmaps* tab. The *Roadmaps to Health Action Center* provides tools and resources to help groups working together to create healthier places. The Opportunities section provides information on funding, recognition, and partnership opportunities. The Connections section helps you learn what others are doing.

## County Health Roadmaps

The *Rankings* illustrate **what we know** when it comes to making people sick or healthy. The *County Health Rankings* confirm the critical role that factors such as education, jobs, income and the environment play in how healthy people are and how long we live.

This report introduces the *County Health Roadmaps*, a new partnership that mobilizes local communities, national partners and leaders across all sectors to improve health. The *County Health Roadmaps* show **what we can do** to create healthier places to live, learn, work and play. The Robert Wood Johnson Foundation collaborates with the University of Wisconsin Population Health Institute to bring this groundbreaking project to cities, counties and states across the nation.

The *Roadmaps* project includes grants to local coalitions and partnerships among policymakers, business, education, public health, health care, and community organizations; grants to national organizations working to improve health; recognition of communities whose promising efforts have led to better health; and customized technical assistance on strategies to improve health.

### **Roadmaps to Health Community Grants**

The *Roadmaps to Health* Community Grants provide funding for 2 years to state and local efforts among policymakers, business, education, healthcare, public health and community organizations working to create positive policy or systems changes that address the social and economic factors that influence the health of people in their community.

### **Roadmaps to Health Partner Grants**

The Robert Wood Johnson Foundation is awarding *Roadmaps to Health* Partner Grants to national organizations that are experienced at engaging local partners and leaders and are able to deliver high-quality training and technical assistance, and committed to making communities healthier places to live, learn, work and play. Partner grantees increase awareness about the *County Health Rankings & Roadmaps* to their members, affiliates and allies. The first Partner Grant was awarded to United Way Worldwide (UWW) in July 2011.

### **Roadmaps to Health Prize**

The Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute will award *Roadmaps to Health* Prizes of \$25,000 to up to six communities that are working to become healthier places to live, learn, work and play. The *Roadmaps to Health* Prize is intended not only to honor successful efforts, but also to inspire and stimulate similar activities in other U.S. communities.



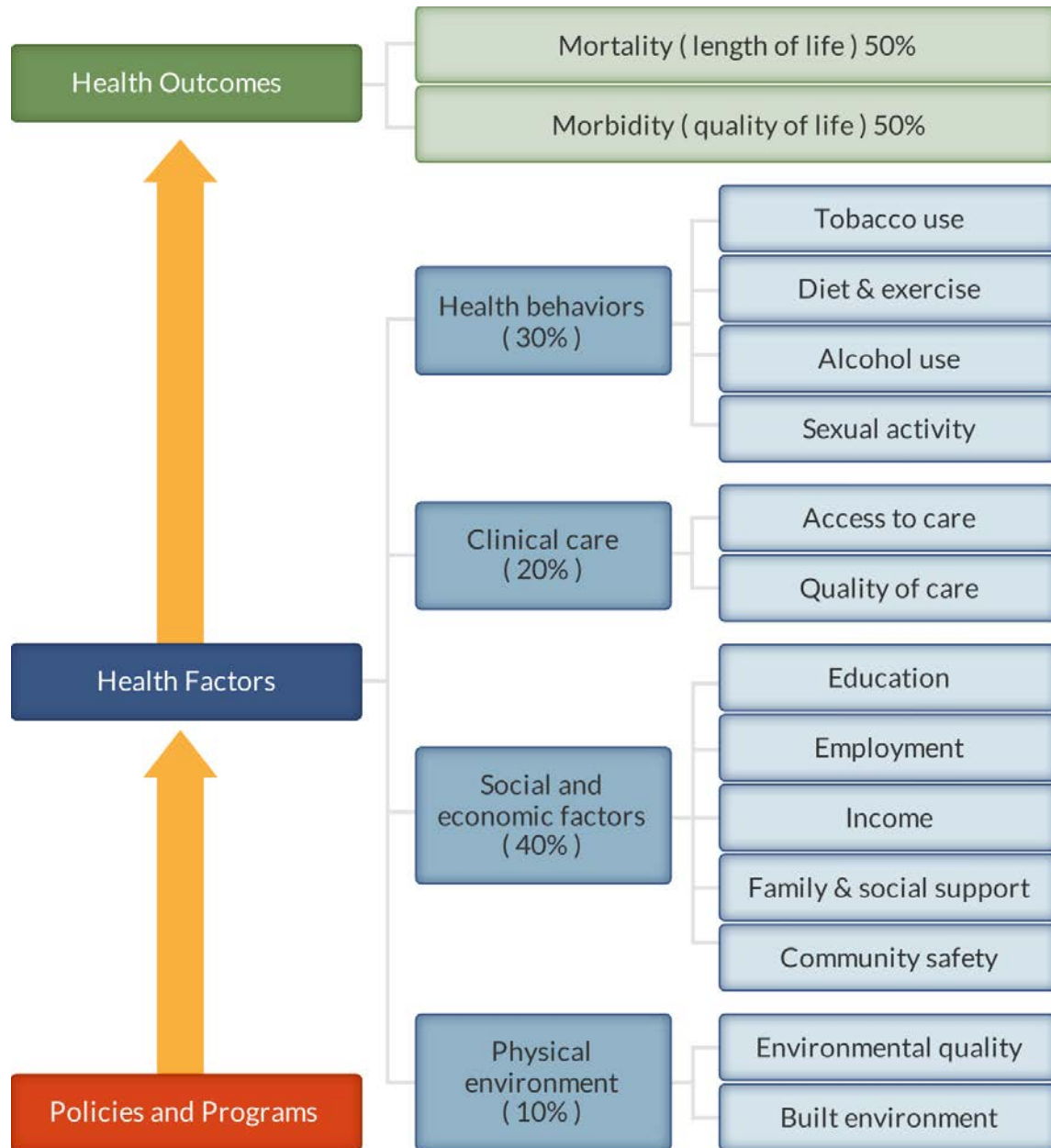
### **Roadmaps to Health Action Center**

The *Roadmaps to Health* Action Center, based at the University of Wisconsin Population Health Institute, provides tools and resources to help groups working to make their communities healthier places. The new Action Center will provide guidance on developing strategies and advocacy efforts to advance pro-health policies, offer opportunities for ongoing learning, and in the summer of 2012, host a searchable database of evidence-informed policies and programs focused on health improvement. Experts provide customized consultation to local communities who have demonstrated the willingness and capacity to address factors that we know influence how healthy a person is, such as education, income and family connectedness.

## County Health Rankings

The 2012 *County Health Rankings* report ranks Montana counties according to their summary measures of **health outcomes** and **health factors**. Counties also receive a rank for mortality, morbidity, health behaviors, clinical care, social and economic factors, and the physical environment. The figure below depicts the structure of the *Rankings* model; those having high ranks (e.g., 1 or 2) are estimated to be the “healthiest.”

Our summary **health outcomes** rankings are based on an equal weighting of mortality and morbidity measures. The summary **health factors** rankings are based on weighted scores of four types of factors: behavioral, clinical, social and economic, and environmental. The weights for the factors (shown in parentheses in the figure) are based upon a review of the literature and expert input, but represent just one way of combining these factors.

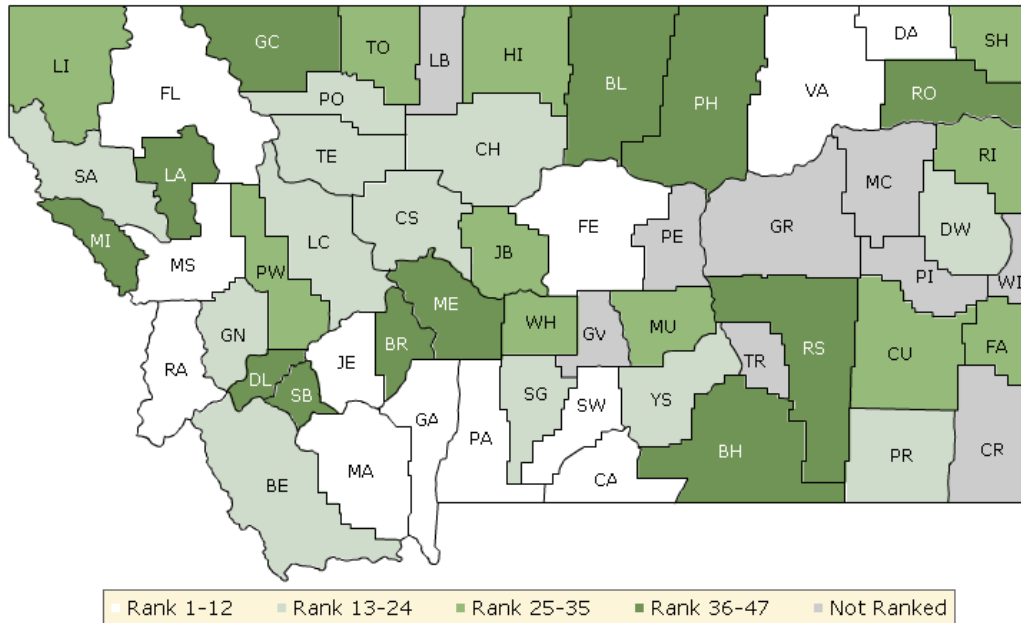


County Health Rankings model ©2012 UWPHI

The maps on this page and the next display Montana's counties divided into groups by health rank. Maps help locate the healthiest and least healthy counties in the state. The lighter colors indicate better performance in the respective

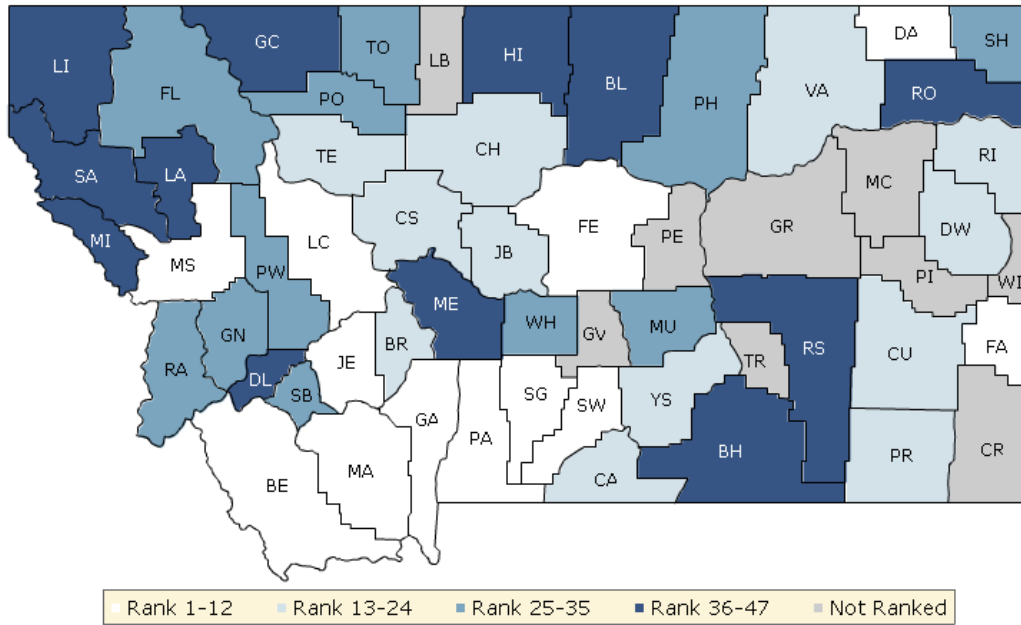
summary rankings. The green map shows the distribution of summary health outcomes. The blue displays the distribution of the summary rank for health factors.

### HEALTH OUTCOMES



County	Rank	County	Rank	County	Rank	County	Rank
Beaverhead	18	Flathead	10	McCone	NR	Roosevelt	47
Big Horn	45	Gallatin	1	Meagher	38	Rosebud	41
Blaine	44	Garfield	NR	Mineral	37	Sanders	22
Broadwater	42	Glacier	46	Missoula	4	Sheridan	29
Carbon	2	Golden Valley	NR	Musselshell	32	Silver Bow	39
Carter	NR	Granite	19	Park	12	Stillwater	7
Cascade	21	Hill	25	Petroleum	NR	Sweet Grass	23
Chouteau	15	Jefferson	11	Phillips	36	Teton	24
Custer	31	Judith Basin	26	Pondera	16	Toole	28
Daniels	5	Lake	40	Powder River	13	Treasure	NR
Dawson	17	Lewis and Clark	20	Powell	35	Valley	8
Deer Lodge	43	Liberty	NR	Prairie	NR	Wheatland	27
Fallon	33	Lincoln	34	Ravalli	9	Wibaux	NR
Fergus	6	Madison	3	Richland	30	Yellowstone	14

## HEALTH FACTORS



County	Rank	County	Rank	County	Rank	County	Rank
Beaverhead	6	Flathead	26	McCone	NR	Roosevelt	45
Big Horn	47	Gallatin	1	Meagher	39	Rosebud	38
Blaine	44	Garfield	NR	Mineral	40	Sanders	42
Broadwater	15	Glacier	46	Missoula	5	Sheridan	25
Carbon	22	Golden Valley	NR	Musselshell	28	Silver Bow	32
Carter	NR	Granite	33	Park	12	Stillwater	10
Cascade	21	Hill	43	Petroleum	NR	Sweet Grass	11
Chouteau	24	Jefferson	4	Phillips	30	Teton	19
Custer	23	Judith Basin	14	Pondera	34	Toole	29
Daniels	8	Lake	41	Powder River	17	Treasure	NR
Dawson	16	Lewis and Clark	2	Powell	35	Valley	18
Deer Lodge	36	Liberty	NR	Prairie	NR	Wheatland	31
Fallon	9	Lincoln	37	Ravalli	27	Wibaux	NR
Fergus	3	Madison	7	Richland	20	Yellowstone	13

## Summary Health Outcomes & Health Factors Rankings

Counties receive two summary ranks:

- Health Outcomes
- Health Factors

Each of these ranks represents a weighted summary of a number of measures.

Health outcomes represent how healthy a county is while health factors represent what influences the health of the county.

Rank	Health Outcomes	Rank	Health Factors
1	Gallatin	1	Gallatin
2	Carbon	2	Lewis and Clark
3	Madison	3	Fergus
4	Missoula	4	Jefferson
5	Daniels	5	Missoula
6	Fergus	6	Beaverhead
7	Stillwater	7	Madison
8	Valley	8	Daniels
9	Ravalli	9	Fallon
10	Flathead	10	Stillwater
11	Jefferson	11	Sweet Grass
12	Park	12	Park
13	Powder River	13	Yellowstone
14	Yellowstone	14	Judith Basin
15	Chouteau	15	Broadwater
16	Pondera	16	Dawson
17	Dawson	17	Powder River
18	Beaverhead	18	Valley
19	Granite	19	Teton
20	Lewis and Clark	20	Richland
21	Cascade	21	Cascade
22	Sanders	22	Carbon
23	Sweet Grass	23	Custer
24	Teton	24	Chouteau
25	Hill	25	Sheridan
26	Judith Basin	26	Flathead
27	Wheatland	27	Ravalli
28	Toole	28	Musselshell
29	Sheridan	29	Toole
30	Richland	30	Phillips
31	Custer	31	Wheatland
32	Musselshell	32	Silver Bow
33	Fallon	33	Granite
34	Lincoln	34	Pondera
35	Powell	35	Powell
36	Phillips	36	Deer Lodge
37	Mineral	37	Lincoln
38	Meagher	38	Rosebud
39	Silver Bow	39	Meagher
40	Lake	40	Mineral
41	Rosebud	41	Lake
42	Broadwater	42	Sanders



Rank	Health Outcomes	Rank	Health Factors
43	Deer Lodge	43	Hill
44	Blaine	44	Blaine
45	Big Horn	45	Roosevelt
46	Glacier	46	Glacier
47	Roosevelt	47	Big Horn

**Not Ranked:** Carter, Garfield, Golden Valley, Liberty, McCone, Petroleum, Prairie, Treasure, Wibaux

## 2012 County Health Rankings: Measures, Data Sources, and Years of Data

	Measure	Data Source	Years of Data
<b>HEALTH OUTCOMES</b>			
<b>Mortality</b>	Premature death	National Center for Health Statistics	2006-2008
<b>Morbidity</b>	Poor or fair health	Behavioral Risk Factor Surveillance System	2004-2010
	Poor physical health days	Behavioral Risk Factor Surveillance System	2004-2010
	Poor mental health days	Behavioral Risk Factor Surveillance System	2004-2010
	Low birthweight	National Center for Health Statistics	2002-2008
<b>HEALTH FACTORS</b>			
<b>HEALTH BEHAVIORS</b>			
<b>Tobacco Use</b>	Adult smoking	Behavioral Risk Factor Surveillance System	2004-2010
<b>Diet and Exercise</b>	Adult obesity	National Center for Chronic Disease Prevention and Health Promotion	2009
	Physical inactivity	National Center for Chronic Disease Prevention and Health Promotion	2009
<b>Alcohol Use</b>	Excessive drinking	Behavioral Risk Factor Surveillance System	2004-2010
	Motor vehicle crash death rate	National Center for Health Statistics	2002-2008
<b>Sexual Activity</b>	Sexually transmitted infections	National Center for Hepatitis, HIV, STD and TB Prevention	2009
	Teen birth rate	National Center for Health Statistics	2002-2008
<b>CLINICAL CARE</b>			
<b>Access to Care</b>	Uninsured	Small Area Health Insurance Estimates	2009
	Primary care physicians	Health Resources & Services Administration	2009
<b>Quality of Care</b>	Preventable hospital stays	Medicare/Dartmouth Institute	2009
	Diabetic screening	Medicare/Dartmouth Institute	2009
	Mammography screening	Medicare/Dartmouth Institute	2009
<b>SOCIAL AND ECONOMIC FACTORS</b>			
<b>Education</b>	High school graduation	National Center for Education Statistics and state-specific sources <sup>1</sup>	2008-2010
	Some college	American Community Survey	2006-2010
<b>Employment</b>	Unemployment	Bureau of Labor Statistics	2010
<b>Income</b>	Children in poverty	Small Area Income and Poverty Estimates	2010
<b>Family and Social Support</b>	Inadequate social support	Behavioral Risk Factor Surveillance System	2006-2010
	Children in single-parent households	American Community Survey	2006-2010
<b>Community Safety</b>	Violent crime rate <sup>2</sup>	Federal Bureau of Investigation	2007-2009
<b>PHYSICAL ENVIRONMENT</b>			
<b>Environmental Quality</b> <sup>3</sup>	Air pollution-particulate matter days	U.S. Environmental Protection Agency	2007
	Air pollution-ozone days	U.S. Environmental Protection Agency	2007
<b>Built Environment</b>	Access to recreational facilities	Census County Business Patterns	2009
	Limited access to healthy foods <sup>4</sup>	U.S. Department of Agriculture	2006
	Fast food restaurants	Census County Business Patterns	2009

<sup>1</sup> NCES used for AK, AL, AR, CA, CT, FL, HI, ID, KY, MT, ND, NJ, OK, SD and TN

<sup>2</sup> State data source for IL.

<sup>3</sup> Not available for AK and HI.

<sup>4</sup> Access to Healthy Foods (2009) from Census Zip Code Business Patterns for AK and HI.

## CREDITS

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